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| APPLICATION NO. | FILING DATE | FIRST NAMED INVENTOR | ATTORNEY DOCKET NO. | CONFIRMATION NO. | |
|---|-----------------|----------------------|---------------------|------------------|--|
| 10/528,306 | 08/25/2005 | Benoit Thevenot | 09669/056001 | 6389 | |
| 22511 OSHA I IANG | 7590 07/03/2007 | | EXAMINER | | |
| OSHA LIANG L.L.P. 1221 MCKINNEY STREET | | | KIM, TAE W | | |
| SUITE 2800 HOUSTON, T | X 77010 | | ART UNIT | PAPER NUMBER | |
| 110001011, 12 | | | 2876 | | |
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| | | • | MAIL DATE | DELIVERY MODE | |
| | | | 07/03/2007 | PAPER | |

Please find below and/or attached an Office communication concerning this application or proceeding.

The time period for reply, if any, is set in the attached communication.

Interview Summary

| Application No. | Applicant(s) |
|-----------------|------------------|
| 10/528,306 | THEVENOT, BENOIT |
| Examiner | Art Unit |
| Tae W. Kim | 2876 |

| | Tae W. Kim | 2876 | | | | |
|--|--|--|--------------------------------|--|--|--|
| All participants (applicant, applicant's representative, PTO | personnel): | | | | | |
| (1) <u>Tae W. Kim</u> . | (3) <u>Jared Fureman</u> . | | | | | |
| (2) <u>Ruchi Walia (59127)</u> . | (4) | | | | | |
| Date of Interview: <u>6/8/07</u> . | | | | | | |
| Type: a)⊠ Telephonic b)☐ Video Conference c)☐ Personal [copy given to: 1)☐ applicant 2 | 2) applicant's representative | e] | | | | |
| Exhibit shown or demonstration conducted: d) Yes If Yes, brief description: | e)⊠ No. | | | | | |
| Claim(s) discussed: <u>8</u> . | 1 | | | | | |
| Identification of prior art discussed: <u>Usami (US 6440773)</u> . | | | | | | |
| Agreement with respect to the claims f)⊠ was reached. g |) was not reached. h) N | I/A. | | | | |
| Substance of Interview including description of the general nature of what was agreed to if an agreement was reached, or any other comments: <u>Usami reference does not teach contactless chip; therefore, any part of rejection based on the premise that Usami's teaches contactless chip will be withdrawn</u> . | | | | | | |
| (A fuller description, if necessary, and a copy of the amendments which the examiner agreed would render the claims allowable, if available, must be attached. Also, where no copy of the amendments that would render the claims allowable is available, a summary thereof must be attached.) | | | | | | |
| THE FORMAL WRITTEN REPLY TO THE LAST OFFICE A INTERVIEW. (See MPEP Section 713.04). If a reply to the GIVEN A NON-EXTENDABLE PERIOD OF THE LONGER INTERVIEW DATE, OR THE MAILING DATE OF THIS INT FILE A STATEMENT OF THE SUBSTANCE OF THE INTE requirements on reverse side or on attached sheet. | last Office action has already OF ONE MONTH OR THIRTY ERVIEW SUMMARY FORM, V | been filed, APP OAYS FROM T WHICHEVER IS | LICANT IS THIS LATER, TO | | | |
| | , | 2 | | | | |

Examiner Note: You must sign this form unless it is an Attachment to a signed Office action.

Examiner's signature, it required

SUPERVISORY PATENT EXAMINER
OF CHMOLOGY CENTER 2800